OAHU CANDIDATES-SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES

andidate Signature

#### STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

## DISCLOSURE REPORT CANDIDATE COMMITTEE



PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.") SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: SECTION II-TYPE OF REPORT: a) Candidate Name: (See the Schedule of Reporting Dates to complete this section) T Preliminary Primary Amended (b) Committee Name: 2nd Preliminary Ymary (c) Mailing Address: Final Primary Preliminary General REPORTING PERIOD (d) Phone (Bus) Final Election Period Treasurer's Supplemental SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section IV on the Back of this Form Before Completing This Section) **COLUMN A COLUMN B ELECTION PERIOD**<sup>\*</sup> **TOTAL THIS PERIOD TOTAL TO DATE** Cash on Hand at the Beginning of the Election Period..... Cash on Hand at the Beginning of this Reporting Period..... Total Receipts (From Line 15)..... Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)..... Total Disbursements (not including Unpaid Expenditures) (From Line 19)..... Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4).... 7. Total Loans at the Closing of this Reporting Period..... Total Unpaid Expenditures at the Closing of this Reporting Period..... Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)..... 10. Surplus/Deficit (Subtract Line 9 from Line 6)..... I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expeditures for the counting period totaling \$2,000 or less Short form reporting requires completion of only Section II, and Section III of this Disclosure Report.

An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a four-year office.

### SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS (If Necessary, Complete Schedules A through E Before Completing This Section)

**COLUMN A COLUMN B** RECEIPTS **ELECTION PERIOD TOTAL THIS PERIOD TOTAL TO DATE** 11. Contributions From: 11 (a) Individuals/Other Entities/Noncandidate Committees/Political Parties 11(a) Monetary and Non-Monetary Contributions of \$100 or Less..... (i) 11(a)(i) Monetary and Non-Monetary Contributions of More Than \$100..... (iii) 11(a)(ii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii))..... 11(a)(iii) Candidate or Candidate's Immediate Family 11(6) Monetary and Non-Monetary Contributions of \$100 or Less..... (i) 11(6)(1) (ii) Monetary and Non-Monetary Contributions of More Than \$100..... 11(b)(ii) (iii) Subtotal (Add Lines 11(b)(i) and 11(b)(iii))..... 11(6)(iii) 12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii).... 12 13. Public Funds and Other Receipts.... 13 15. Total Receipts (Add Lines 12 through 14).... DISBURSEMENTS 16. Expenditures.... 17. Loans Repaid or Forgiven.... 18. Unpaid Expenditures Paid or Forgiven..... 19. Subtotal Disbursements (Add Lines 16 through 18)..... 20. Unpaid Expenditures..... 21. Total Disbursements (Add Lines 19 and 20).....



#### SCHEDULE B EXPENDITURES CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE

ND CANDIDATE COMMITTEE NAME:	PAGE	OF
FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE O FAIR MARKET VAL OF NON-MONETAL CONTRIBUTION THIS PERIOD
NON-MONETARY CONTRIBUTION LONG STRUCTURE LONG STRUCTURE  NON-MONETARY CONTRIBUTION  LONG STRUCTURE  NON-MONETARY CONTRIBUTION	No. 6 Enverdes	39.4
NON-MONETARY CONTRIBUTION  OF TICE WAX	RUBBER STAMB	111.66
NON-MONETARY CONTINUED TION	Corves	128.La
NON-MONETARY CONTRIBUTION	STAMPS	1939.40
NON-MONETARY CONTRIBUTION SEAL	WALL LABELE	704. a
NOMMONETARY CONTRIBUTION  WAL MAKES	ENVELORES	100.00
	NON-MONETARY CONTRIBUTION  NON-MONETARY CONTRIBUTION	NON-MONETARY CONTRIBUTION   STAMPS

# ATTACH A COPY OF THE EXECUTED LOAN DOCUMENT AT THE TIME OF INITIAL DISCLOSURE

#### STATE OF HAWAII CAMPAIGN SPENDING COMMISSION



NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AN	ND CANDIDATE COMMITTEE NAME:		PAGE	OF	
LOAN SOURCE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF LENDER  NAME OF EMPLOYER AND OCCUPATION  PURPOSE OF LOAN	AMOUNT OF LOAN AT BEGINNING OF THIS PERIOD	NEW LOAN AMOUNT THIS PERIOD	AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS PERIOD
CANDIDATE ARMEDIATE FAMILY ANANCIAL INSTITUTION OTHER	HEORNE WONED 1017 WILL AVE Hun HI 960816	Ю	2581.32	FORGIVEN	2581.32
☐ CANDIDATE ☐ MAMEDIATE FAMILY ☐ FINANCIAL INSTITUTION ☐ OTHER				FORGIVEN	
☐ CANDIDATE ☐ IMMEDIATE FAMILY ☐ FINANCIAL INSTITUTION ☐ OTHER				FORGIVEN	
CANDIDATE MANEDIATE FAMILY FINANCIAL INSTITUTION OTHER				FORGIVEN	
CANDIDATE  IMMEDIATE FAMILY  FINANCIAL INSTITUTION  OTHER				FORGIVEN	
2. TOTAL NEW LO	nis Page) DANS THIS PERIOD (Last Page Only) (Transfer total to Line Noort)	umber 14 of	764120		
3. TOTAL LOANS	REPAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transport)	i for total to line:	Number 17 of		
. TOTAL LOANS	AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfe	er total to Line N	umber 7 of the Discl	osure Report)	2581.37

Form CC-5(D) (Rev. 5/99) as an "Expenditure" on Schedule B.